

PTO/SB/01 (08-09)

Approved for use through 07/31/2008, OMB 0651-0032
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**DECLARATION FOR UTILITY OR
 DESIGN
 PATENT APPLICATION
 (37 CFR 1.63)**

☒ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1189U003US00
First Named Inventor	Bret Gorsline
COMPLETE IF KNOWN	
Application Number	Unknown
Filing Date	Herewith
Art Unit	Unknown
Examiner Name	Unknown

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS AND SYSTEMS FOR PROGRAMMABLY GENERATING ELECTRONIC AGGREGATE CREATIVES FOR DISPLAY ON AN ELECTRONIC NETWORK

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

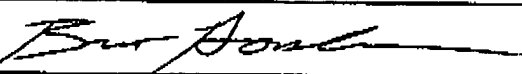

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/01 (08-03)
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/> OR <input checked="" type="checkbox"/> Correspondence address below			
Name Axiom Legal Solutions c/o PortfolioIP			
Address P.O. Box 52050			
City Minneapolis		State MN	ZIP 55402
Country US	Telephone 203-438-1077	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Bret Alan (first and middle [if any])		Family Name Gorsline or Surname	
Inventor's Signature 		Date 12/1/03	
Residence: City Flemington	State NJ	Country US	Citizenship US
Mailing Address 8 Packers Island Lane			
City Flemington	State NJ	ZIP 08822	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Ron Hyman (first and middle [if any])		Family Name Rothman or Surname	
Inventor's Signature 		Date 12/1/03	
Residence: City New Brunswick	State NJ	Country US	Citizenship US
Mailing Address 1050 George St #19G			
City New Brunswick	State NJ	ZIP 08901	Country US
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

PTO/SB/81 (08-03)

Approved for use through 11/30/2005. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	Bret Alan Gorsline
Title	METHODS AND SYSTEMS FOR PROGRAMMABLY GENERATING ELECTRONIC AGGREGATE CREATIVES EXHIBIT ON AN ELECTRONIC NETWORK
Art Unit	
Examiner Name	Unknown
Attorney Docket Number	1199UD03US00

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Brandt, Jeffrey L.	31,490

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Axiom Legal Solutions c/o PortfolioIP				
Address	P.O. Box 52050				
Address					
City	Minneapolis	State	MN	Zip	55402
Country	United States of America				
Telephone	203-438-1077	Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Name	Ron Hyman Rothman				
Signature	<i>Ron Rothman</i>				
Date	12-1-03	Telephone	908-541-3752		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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**POWER OF ATTORNEY
 and
 CORRESPONDENCE ADDRESS
 INDICATION FORM**

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	Bret Alan Gorsline
Title	METHODS AND SYSTEMS FOR PROGRAMMABLY GENERATING ELECTRONIC AGGREGATE CREATIVES EPICUREAN ON AN ELECTRONIC NETWORK
Art Unit	
Examiner Name	Unknown
Attorney Docket Number	1198U003US00

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Brandt, Jeffrey L	31,490

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ The address associated with Customer Number:

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<input checked="" type="checkbox"/> Firm or Individual Name	Axiom Legal Solutions c/o PortfolioIP				
Address	P.O. Box 52050				
Address					
City	Minneapolis	State	MN	Zip	55402
Country	United States of America				
Telephone	203-438-1077	Fax			

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 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Name	Bret Alan Gorsline		
Signature	<i>Bret Gorsline</i>		
Date	12/1/03	Telephone	908-541-3789

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

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